

Work Order ID 119269

119269

Page 1

May-14-14 10:36:52 AM

Item ID: D4635-142 Accept *N900040100* Setup Start *NS1*
Revision ID: Stop *NS2*
Item Name: Fwd Ceiling Replacement Panel Assembly, RH

Start Date: 5/14/14 Start Qty: 1.00 *1* Cust Item ID:
Required Date: 5/14/14 Req'd Qty: 1.00 *1* Customer:

Reference:

Approvals: Process Plan: MLJ Date: 14-05-14 Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____
Run Start *NR1*
Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4635	E								
100		0.00							
100		0.00							
Hand Thermo	Memo								
Hand Finishing Thermoforming	Pick Kit								

① SAS 14/06/10

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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Work Order ID 119269

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Page 2

May-14-14 10:36:52 AM

Item ID: D4635-142

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Fwd Ceiling Replacement Panel Assembly, RH

Start Date: 5/14/14 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 5/14/14 Req'd Qty: 1.00 *1*

Customer:

Reference:

Run Start *NR1*

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Stop *NR2*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

110

110

Small Fab

Small Fab

Memo

0.00

Assemble as per Dwg D4635-142

Bond foam core to inside of panel

3M Scotch Weld 1300 Batch: M129454

1- Scuff bonding surface to eliminate in-perfections and increase bonding and clean with wash& wipe

2- Locate and glue down Channel Assy, angles, brackets, and mounting pads using 3M Plastic welder II.(see note 8)

Batch # M129001Expiry Date 12/06/2014

3- Apply labels as per Dwg. and seal with 3M 3950 edge sealer(see note 9)

Batch: M124725

DAS

27

9-89

0.00

0.00

4/6/10

120

120

QC

Quality Control

QC5- Inspect part completeness to step on W/O

Memo

DQA: _____ Date: _____



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Page 3

May-14-14 10:36:52 AM

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 Revision ID: Stop *NS2*
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 Start Date: 5/14/14 Start Qty: 1.00 *1* Cust Item ID:
 Required Date: 5/14/14 Req'd Qty: 1.00 *1* Customer:

Reference: Run Start *NR1*
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 QC: Date: SPC (Y/N): Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>MF</u>	0.00							
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

① STD 14/06/10

MLJ 14-06-11

MF 14-6-10

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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FAULT CATEGORY

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FAULT CATEGORY

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Picklist Print

Page 2

May-14-14 10:36:58 AM

Work Order ID: 119269

119269

Parent Item: D4635-142

D4635-142

Parent Item Name: Fwd Ceiling Replacement Panel Assembly, RH

Start Date: 5/14/14

Required Date: 5/14/14

Start Qty: 1.00

Required Qty: 1.00

D4732-35

Manufactured No

100

Each

9.0000

1

1

D4732-35

Label

**

SAD 14/06/10

Location

Loc Qty

Loc Code

ST122

9

111257

9

D4732-7

Manufactured No

100

Each

9.0000

1

1

D4732-7

Label

**

SAD 14/06/10

Location

Loc Qty

Loc Code

MF4

9

111262

9

D5022-1

Manufactured No

100

Each

4.0000

1

1

D5022-1

Foam, Side Panel, Fwd

**

SAD 14/06/09

Location

Loc Qty

Loc Code

GA

4

114043

4

3116252

May-14-14 10:36:58 AM

Shop Packet Print

Page 2

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

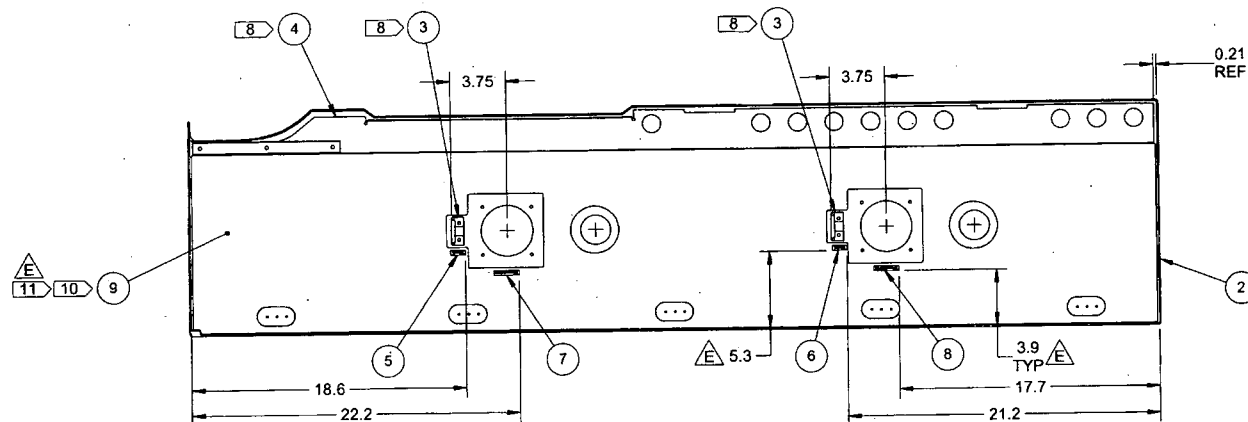
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FAULT CATEGORY

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ITEM NO.	QTY. -142	PART NUMBER	DESCRIPTION
1	X	D4635-142	RH, FWD CEILING REPLACEMENT PANEL ASSY
2	1	D4635-2	RH, FWD CEILING PANEL
3	2	D4669-1	BRACKET
4	1	D4695-042	RH CHANNEL ASSEMBLY
5	1	D4732-3	LABEL
6	1	D4732-7	LABEL
7	1	D4732-31	LABEL
8	1	D4732-35	LABEL
9	1	D5022-1	FOAM, SIDE PANEL, FWD



D4635-142 RH, FWD CEILING REPLACEMENT PANEL ASSY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) APPLY A BEAD (0.20 TO 0.30 WIDE) OF DEVCON PLASTIC WELDER II (0.25 INSIDE OF BOTH EDGES OF PART) TO BOND D4669-1 & D4695-042. WAIT FOR 2 TO 4 HOURS FOR FUNCTIONAL CURE
- 9) LOCATE LABELS AS SHOWN, SEAL LABELS USING 3950 EDGE SEALER OVER LABEL TOP SURFACE
- 10) APPLY AN EVEN COAT OF 3M SCOTCH WELD 1300L CONTACT ADHESIVE TO BOND D5022-1 FOAM CORE TO INSIDE OF PANEL
- 11) CENTER D5022-1 FOAM ON D4635-2

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DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	DC	DRAWING NO.	REV. E
MFG. APPR.	DC	D4635	SHEET 10 OF 18
APPROVED	DC	TITLE	SCALE
DE APPR.	DC	OUTBOARD CEILING PANELS	
DATE	14.01.09	NTS	
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